FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H24409** **(5)**

1. Corporation Name

PRO ELECTRIC VEHICLES, INC.

Principal Place of Business

2322 SW 58TH TERR
HOLLYWOOD FL 33023

Mailing Address

2322 SW 58TH TERR
HOLLYWOOD FL 33023

2. Principal Place of Business
21 Street Apt #, etc.
22 City & State
23 Zip 24 County 25

2a. Mailing Address
26 Street Apt #, etc.
27 City & State
28 Zip 29 County 30

3. Date Incorporated or Qualified: **10/05/1984**

3a. Date of Last Report: **03/29/1995**

4. FEI Number: **59-2654778** Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. The corporation is eligible for indirect tax credits 196.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NAVARRO, ALBERT
2322 SW 58TH TERRACE
HOLLYWOOD FL 33023

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes, the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The street address of its registered office and the name of its registered agent are as shown below. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of my position as registered agent, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE P
NAME NAVARRO, ALBERT
STREET ADDRESS 16220 SW 53RD ST.
CITY, ST, ZIP FT. LAUDERDALE FL 33331
☐ DELETE

TITLE V
NAME NAVARRO, GERTRUDIS
STREET ADDRESS 16220 SW 53RD ST.
CITY, ST, ZIP FT. LAUDERDALE FL 33331
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
☐ DELETE

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
☐ Change ☐ Addition

2. TITLE
3. NAME
4. STREET ADDRESS
5. CITY, ST, ZIP
☐ Change ☐ Addition

3. TITLE
4. NAME
5. STREET ADDRESS
6. CITY, ST, ZIP
☐ Change ☐ Addition

4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY, ST, ZIP
☐ Change ☐ Addition

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
☐ Change ☐ Addition

6. TITLE
7. NAME
8. STREET ADDRESS
9. CITY, ST, ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information indicated on this report or supplemental report filed pursuant to Section 607.0502 or 617.0502, Florida Statutes, is true and accurate and that my electronic signature shall have the same force and effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in addition to, the officers and directors of the corporation as prescribed in Chapter 607 or 617, Florida Statutes,